



Attorney Dkt. 12263

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re PATENT APPLICATION OF

Confirmation No.: 8423

Inventor(s): Lawrence J. O'CONNOR

Application No.: 10/821,186

Group Art Unit: 1734

Filed: April 9, 2004

Examiner: S. P. Chan

Title: METHOD OF APPLYING A COVERING HAVING AN INTEGRAL BARRIER FOR  
USE ON TREATED BOARDS

April 26, 2005

SUBMISSION OF FORMAL REPLACEMENT DRAWINGS RESPONSIVE TO  
APRIL 21 NOTICE

Mail Stop Amendment  
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P.O. Box 1450  
Alexandria, VA 22313-1450

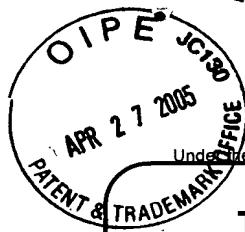
Sir:

In response to the April 21, 2005, PTO Notice requiring drawings labeled as replacement sheets, submitted herewith are four sheets of formal drawings labeled as replacement sheets. The drawings have merely been formalized, and no changes have been made to the content drawings.

Respectfully submitted,

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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

6

Application Number	10/821,186
Filing Date	04/09/2004
First Named Inventor	O'Connor
Art Unit	1734
Examiner Name	S. Chan

Attorney Docket Number

12263

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	ROBERTS, MLOTKOWSKI & HOBBS, PC Customer No. 25570		
Signature			
Printed name	Caroline D. Dennison		
Date	April 26, 2005	Reg. No.	34,494

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Signature			
Typed or printed name	Caroline D. Dennison	Date	April 26, 2005

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